

1 10A NCAC 13P .1103 is proposed for amendment as follows:

2
3 **10A NCAC 13P .1103 REGIONAL TRAUMA SYSTEM POLICY DEVELOPMENT**

4 The RAC shall oversee the development, implementation, and evaluation of the regional trauma system ~~to include:~~
5 that includes:

- 6 (1) ~~Public~~ A public information and education ~~programs~~ program to include system access and injury
7 prevention;
- 8 (2) Written trauma system guidelines ~~to address~~ addressing the following:
- 9 (a) Regional communications;
- 10 (b) Triage;
- 11 (c) Treatment at the ~~scene~~ accident scene, and in the pre-hospital, inter-hospital, and
12 Emergency Department to include guidelines to facilitate the rapid assessment and initial
13 resuscitation of the severely injured ~~patient, including primary and secondary survey.~~
14 patient. Criteria addressing management during transport shall include continued
15 assessment and management of airway, cervical spine, breathing, circulation, neurologic
16 and secondary parameters, communication, and documentation.
- 17 (d) Transport to determine the appropriate mode of transport and level of care required to
18 transport, considering patient condition, requirement for trauma center resources, family
19 requests, and capability of transferring entity.
- 20 (e) Bypass procedures that define:
- 21 (i) circumstances and criteria for bypass decisions;
- 22 (ii) time and distance criteria; and
- 23 (iii) mode of transport which bypasses closer facilities.
- 24 (f) ~~Scene~~ Accident scene and inter-hospital diversion procedures that shall include
25 delineation of specific factors such as hospital census or acuity, physician availability,
26 staffing issues, disaster status, or transportation which would require routing of a patient
27 to another ~~hospital or trauma center.~~ Trauma Center.
- 28 (3) Transfer agreements ~~(to include~~ (including those with other hospitals, as well as specialty care
29 facilities such as burn, pediatrics, spinal cord, and rehabilitation) which shall outline mutual
30 understandings between facilities to transfer/accept certain patients. These shall specify
31 responsible parties, documentation requirements, and minimum care requirements.
- 32 (4) A performance improvement plan that includes:
- 33 (a) A regional trauma peer review committee of the RAC;
- 34 (i) whose membership and responsibilities are defined in G.S. 131E-162; and
- 35 (ii) continuously evaluates the regional trauma system through structured review of
36 process of care and outcomes; and

(b) ~~The existing trauma registry database and the RAC registry database, once operational,~~
~~that report quarterly or as requested by the OEMS. Utilization of patient care data.~~

History Note: Authority G.S. 131E-162;
Temporary Adoption Eff. January 1, 2002;
Eff. April 1, 2003;
Amended Eff. January 1, 2009; January 1, 2004.